

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Divisional
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	HIGH DENSITY MICROWALL EXPANDED POLYTETRAFLUOROETHYLENE
Attorney Docket Number::	297912003410
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Tim
Family Name::	NIEMAN
City of Residence::	Chandler
State or Province of Residence::	AZ
Country of Residence::	US
Street of mailing address::	2507 W. Summit Place
City of mailing address::	Chandler
State or Province of mailing address::	AZ
Postal or Zip Code of mailing address::	85224

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Randy  
Middle Name:: Earl  
Family Name:: SAYLOR  
City of Residence:: Gilbert  
State or Province of Residence:: AZ  
Country of Residence:: US  
Street of mailing address:: 147 W. Liberty Lane  
City of mailing address:: Gilbert  
State or Province of mailing address:: AZ  
Postal or Zip Code of mailing address:: 85233

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Family Name:: HUNKINS  
City of Residence:: Mesa  
State or Province of Residence:: AZ  
Country of Residence:: US  
Street of mailing address:: 1338 S. Oracle  
City of mailing address:: Mesa  
State or Province of mailing address:: AZ  
Postal or Zip Code of mailing address:: 85204

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Family Name:: CALCOTE  
City of Residence:: Issaquah  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 23959 SE 41st Place  
City of mailing address:: Issaquah  
State or Province of mailing address:: WA  
Postal or Zip Code of mailing address:: 98029

**Correspondence Information**

Correspondence Customer Number:: 25224

**Representative Information**

Representative Customer Number:: 25224

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/718,923	11/22/00

**Assignee Information**

Assignee name:: IMPRA, Inc., a subsidiary of C.R. Bard, Inc.